



Adult Kickball League



Roster

Team Name: _____ **Jersey Color:** _____

1.	14.
2.	15.
3.	16.
4.	17.
5.	18.
6.	19.
7.	20.
8.	21.
9.	22.
10.	23.
11.	24.
12.	25.
13.	26.

Team Captain: _____ **Email:** _____

Each team is responsible for matching shirts/jerseys. Numbers and names on jerseys are encouraged but not required. Each team member is responsible for filling out and signing this waiver form before they can participate in the league. Players must be over the age of 16 to participate. All players must sign waiver form to compete.



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Waiver and Liability Release Form

Team Name: _____ **Jersey Color:** _____

Liability Release Statement- I hereby release the City of Harrisonburg from all claims for damages arising from any accidents from any injuries that are caused by or arise from participation of the applicant named on this registration form during the program or in any facility or at any location where a program is being held.

Print Name	Signature	Print Name	Signature
1. _____	_____	14. _____	_____
2. _____	_____	15. _____	_____
3. _____	_____	16. _____	_____
4. _____	_____	17. _____	_____
5. _____	_____	18. _____	_____
6. _____	_____	19. _____	_____
7. _____	_____	20. _____	_____
8. _____	_____	21. _____	_____
9. _____	_____	22. _____	_____
10. _____	_____	23. _____	_____
11. _____	_____	24. _____	_____
12. _____	_____	25. _____	_____
13. _____	_____	26. _____	_____